

## CME POSTTEST

THERE IS ONLY ONE CORRECT ANSWER TO EACH QUESTION.

- 1. A healthy diet and lifestyle should be encouraged in which of the following?**
  - a. Only those patients with a baseline A1C level > 9.0%
  - b. Only those patients who are not compliant with therapy
  - c. Only those patients who fail oral antidiabetes therapy
  - d. All patients with type 2 diabetes mellitus (T2DM)
- 2. Pharmacologic therapy can be initiated in patients with T2DM using:**
  - a. An oral antidiabetes drug
  - b. An amylin analog (pramlintide)
  - c. An incretin mimetic (exenatide)
  - d. A dipeptidyl-peptidase IV (DPP-IV) inhibitor
- 3. The ideal basal insulin replacement would have:**
  - a. Once-daily dosing
  - b. A duration of action lasting 24 hours
  - c. No pronounced peak (flat) activity profile
  - d. All of the above
- 4. Which of the following statements regarding insulin glargine is FALSE?**
  - a. Insulin glargine has a 24-hour duration of action with no pronounced peak.
  - b. Insulin glargine was associated with less nocturnal hypoglycemia compared with NPH insulin in clinical trials.
  - c. Insulin glargine is dosed once daily.
  - d. None of the above
- 5. Which of the following statements regarding insulin detemir is TRUE?**
  - a. Insulin detemir is a short-acting insulin analog.
  - b. Insulin detemir causes excessive weight gain.
  - c. Many patients in clinical trials required twice-daily dosing with insulin detemir.
  - d. Insulin detemir is used for prandial glucose coverage.
- 6. Prandial insulin therapy:**
  - a. Can be added to basal insulin therapy if A1C goals are not at target despite adequate titration
  - b. Should NOT approximate physiologic insulin secretion at mealtimes
  - c. Should be initiated with long-acting insulin analogs
  - d. Should be initiated with 1 injection at the smallest meal of the day
- 7. Please select the FALSE statement:**
  - a. Exenatide is an incretin mimetic.
  - b. Exenatide is a good substitute for insulin in insulin-requiring patients.
  - c. Exenatide is administered by injection.
  - d. Exenatide is administered twice daily.
- 8. Which of the following statements regarding pramlintide is TRUE?**
  - a. Pramlintide is a synthetic analog of amylin.
  - b. Amylin is a naturally occurring hormone that suppresses postprandial glucagon secretion and regulates the rate of gastric emptying.
  - c. Pramlintide dosing ranges from 60 µg to 120 µg immediately prior to major meals in patients with T2DM.
  - d. All of the above
- 9. Please select the FALSE statement:**
  - a. Inhaled human insulin does not require any dosage titration once it is initiated.
  - b. Inhaled human insulin has a rapid onset of action.
  - c. Inhaled human insulin can be used in combination with oral agents or basal insulin.
  - d. Inhaled human insulin is indicated for prandial glucose coverage.
- 10. More data are needed regarding the newer agents AND:**
  - a. Their long-term efficacy and safety
  - b. Their use in combination with basal or prandial insulin analogs
  - c. Both of the above
  - d. Neither of the above

# Appropriate Use of Insulin Analogs

in an Increasingly Complex Type 2 Diabetes Mellitus (T2DM) Therapeutic Landscape

## POST-ACTIVITY Evaluation and Credit Application

**Release date:** January 2007

**Expiration date:** January 2008

To receive continuing education credit for this activity you must complete this Evaluation and Application for Continuing Education Credit

### COURSE EVALUATION

I. Please evaluate this educational activity by checking the appropriate box:

#### Activity Evaluation

Circle the appropriate response  
(1 = Excellent; 2 = Very Good; 3 = Good; 4 = Fair; 5 = Poor)

Faculty	1	2	3	4	5
Content	1	2	3	4	5
Facilities	1	2	3	4	5
How well did this activity avoid commercial bias and present content that was fair and balanced?	1	2	3	4	5
What is the likelihood you will change the way you practice based on what you learned in this activity?	1	2	3	4	5
Overall, how would you rate this activity?	1	2	3	4	5

### II. Course Objectives

Were the following overall course objectives met? At the conclusion of this presentation, are you able to:

Objective	Yes	Somewhat	No
Discuss the benefits that the appropriate insulin analogs provide when treating fasting and postprandial hyperglycemia			
Categorically present the various treatment options that are available for T2DM			
Present advantages and disadvantages of the various therapeutic options and what they address (ie, fasting or postprandial hyperglycemia)			
Present studies that address combination therapies of insulin with newer agents with available data			

### III. Additional Questions

a. Suggested topics and/or speakers you would like for future activities

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b. Additional comments

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### CREDIT APPLICATION

Instructions:

- Applications will only be accepted through January 31, 2008.
- Please anticipate 6-8 weeks to receive your certificate.
- Please do not use abbreviations not recognized by USPS.

Please print clearly as illegible applications will result in a delay.

Name: \_\_\_\_\_

Profession: \_\_\_\_\_

License #: \_\_\_\_\_

State of License: \_\_\_\_\_

Address (if business, please include floor and/or department):  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please check which credit you are requesting.

ACCME (Physician)

I certify that I participated in Appropriate Use of Insulin Analogs in an Increasingly Complex Type 2 Diabetes Mellitus (T2DM) Therapeutic Landscape

ATTENDANCE: Please fill in the number of actual hours that you spent on this activity. \_\_\_\_\_

Date of participation: \_\_\_\_\_

Number of hours (Max 0.75 hrs) \_\_\_\_\_

Signature \_\_\_\_\_

Please submit completed application to:  
Medical Education Collaborative  
651 Corporate Circle, Suite 104  
Golden, CO 80401